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APPLICANTS

Alan Richard Ball, Gilbert, AZ;
 Alejandro Lara-Ascsorra, Phoenix, AZ;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY AZ	SHEETS DRAWING 4	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____	Initials _____			

ADDRESS

James J. Stipanuk
 Semiconductor Components Industries, L.L.C.
 Patent Administration Dept - MD/A700
 P.O. Box 62890
 Phoenix ,AZ 85082-2890

TITLE

LINEAR REGULATOR WITH OVERCURRENT PROTECTION

FILING FEE RECEIVED 1070	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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